# DENTAL PROGRAM PERMITTING EVENT CODES/DATES

**EFFECTIVE DATES RULES:** STANDARD First day of the month after the STD. 692 is received by the

employing department. Example: Received 3/5 Effective

4/1

**MANDATORY** First day of the month following the event.

#### **NEW ENROLLMENTS**

| Permitting Event   | Permitting<br>Event Code | Permitting Event Date                | Effective Date of Action | Time Limit to File Document                       |
|--|--------------------------|--------------------------------------|--------------------------|---|
| New employee/eligible appointment, reinstatement from retirement, transfer from State Fair districts or Legislative branches   | 01                       | Appointment Date                     | Standard                 | 60 days from appointment date                     |
| Enrollment of self, or self and dependents, after coverage as a dependent terminates for any reason (e.g., divorce, loss of spouse, etc.) except voluntary cancellations | 05                       | Date other coverage ended            | Mandatory                | 60 days from event                                |
| Enrollment of employee who was off active pay status during entire open enrollment period (includes return from military leave)  | 07                       | Date of return to pay status         | Standard                 | 60 days from return to active pay status          |
| Enroll or change from prepaid to indemnity plan after completion of required prepaid restriction period (includes CAHP and CCPOA plans)                                  | 08                       | Date prepaid restriction period ends | Standard                 | 60 days from date prepaid restriction period ends |

#### DENTAL PROGRAM FAMILY MEMBER ADDITIONS

| Permitting Event   | Permitting<br>Event Code | Permitting Event Date  | Effective Date of Action | Time Limit to File Document |
|--|--------------------------|--|--------------------------|-----------------------------|
| Add upon return to active pay status after being off during entire open enrollment period (includes return from military leave)                  | 15a                      | Date of return to pay status                                       | Standard                 | 60 days from event          |
| Change of custody or adding child who has become economically dependent on employee including economic dependency created through a court order. | 16                       | Date of custody change or economically dependent child is acquired | Standard                 | 60 days from event          |
| New spouse, domestic partner and/or stepchild to a one party enrollment**  | 17a                      | Date family member acquired  | Standard                 | 60 days from event          |
| Spouse, domestic partner and/or dependents that lost coverage to a one party enrollment (except voluntary cancellations) (*)                     | 17b                      | Date other coverage ended  | Mandatory                | 60 days from event          |
| Return from military leave   | 18                       | Date of return   | Standard                 | 60 days from event          |
| Newborn, adopted child, or a child at age 3 to a one party enrollment  | 19                       | Date of birth, physical custody or 3rd birthday                    | Standard                 | 60 days from event          |
| New spouse, domestic partner and/or stepchild to a two or more party enrollment**  | 21a                      | Date family member acquired  | Standard                 | 60 days from event          |
| Spouse, domestic partner and/or dependents that lost coverage to a two or more party enrollment (except voluntary cancellations) (*)             | 21b                      | Date other coverage ended  | Mandatory                | 60 days from event          |
| Newborn, adopted child, or a child at age 3 to a two or more party enrollment  | 22a                      | Date of birth, physical custody or 3rd birthday                    | Standard                 | 60 days from event          |

<sup>\*</sup>For the addition of domestic partners who are considered "economic dependents" for tax purposes, when this partner is added to benefits, the party code must also be changed from a 2 party code to the "A" code and from a 3 party (denotes 3 or more party code) to a "B" code.

### DENTAL PROGRAM DELETION OF CHILDREN

| Permitting Event  | Permitting<br>Event Code | Permitting Event Date          | Effective Date of Action | Time Limit to File Document |
|---|--------------------------|--------------------------------|--------------------------|-----------------------------|
| Change in custody   | 23a                      | Date custody changed           | Mandatory (*)            | No time limit               |
| Obtains other group coverage (NOT Statesponsored plan)                                    | 23b                      | Date other coverage begins     | Standard                 | No time limit               |
| Child's 18th birthday<br>(Voluntary deletion)   | 23c                      | 18th birthday                  | Standard                 | No time limit up to age 23  |
| Child entering military service   | 26a                      | Date of entry                  | Mandatory (*)            | No time limit               |
| Marriage of child<br>(Mandatory Deletion)   | 26b                      | Date of marriage               | Mandatory (*)            | No time limit               |
| Death of child (Mandatory Deletion)   | 26c                      | Date of death                  | Mandatory (*)            | No time limit               |
| Child's 23rd birthday, unless disabled (Mandatory Deletion)                               | 26d                      | 23rd birthday                  | Mandatory (*)            | No time limit               |
| Child enrolling as an employee in State-<br>sponsored dental plan<br>(Mandatory Deletion) | 26e                      | Day before new coverage begins | Mandatory (*)            | No time limit               |
| Child no longer economically dependent (Mandatory Deletion)                               | 26f                      | Date of change in dependency   | Mandatory (*)            | No time limit               |
| Child under age 3 (may not re-enroll until open enrollment or age 3)                      | 26g                      | Date document signed           | Standard                 | Up to age 3                 |

<sup>(\*)</sup> No time limit but document should be processed promptly. Employees will be responsible for any claims incurred on or after the effective date for retroactive mandatory deletions.

# DENTAL PROGRAM DELETION OF SPOUSE

| Permitting Event  | Permitting<br>Event Code | Permitting Event Date          | Effective Date of Action | Time Limit to File Document                   |
|---|--------------------------|--------------------------------|--------------------------|---|
| Spouse or domestic partner obtains other group coverage (NOT Statesponsored plan)   | 24a                      | Date other coverage begins     | Standard                 | No time limit                                 |
| Spouse or domestic partner moves out of household (may not re-enroll as dependent until open enrollment)  | 24b                      | Date of move                   | Standard                 | No time limit (spouse not eligible for COBRA) |
| Divorce or termination of a domestic partnership (Mandatory Deletion) (May include deletion of step children [divorce] or comically dependent children [Domestic Partnership] on same document) | 27a                      | Date of divorce                | Mandatory (*) (**)       | No time limit (spouse eligible for COBRA)     |
| Death of Spouse (Mandatory Deletion)  | 27b                      | Date of Death                  | Mandatory(*)             | No time limit                                 |
| Spouse or domestic partner entering military service  | 27c                      | Date of entry                  | Standard                 | No time limit                                 |
| Spouse or domestic partner enrolling as an employee in a State-sponsored plan (Mandatory Deletion)  | 27d                      | Day before new coverage begins | Mandatory (*)            | No time limit                                 |

<sup>(\*)</sup> No time limit but document should be processed promptly. Employees will be responsible for any claims incurred on or after the effective date for retroactive mandatory deletions.

<sup>(\*\*)</sup> Requires copy of final divorce decree, dissolution of marriage court document, or termination of domestic partnership documentation, which should be maintained in the employee's personnel folder.

# DENTAL PROGRAM PERMANENT INTERMITTENT - ENROLLMENT/CANCELLATION

| Permitting Event   | Permitting<br>Event Code | Permitting Event Date                 | Effective Date of Action  | Time Limit to File Document                 |
|--|--------------------------|---------------------------------------|---|---|
| New enrollment   | 04                       | June 30 or December 31                | First of the month after<br>the STD. 692 is received<br>by the employing<br>department. (NOTE:<br>Effective date can be no<br>earlier than February 1 or<br>August 1) | 60 days from the end of the control period  |
| Employee Appointed P.I. reinstatement from retirement to active P.I. employment status | 04a                      | Date of reinstatement from retirement | First of the month following reinstatement date   | 60 days from reinstatement date             |
| Cancellation due to loss of eligibility  | 39                       | June 30 or December<br>31             | August 1 or February 1  | 60 days from the event (eligible for COBRA) |

# DENTAL PROGRAM MISCELLANEOUS DELETIONS AND ENROLLMENT

| Permitting Event  | Permitting<br>Event Code | Permitting Event Date  | Effective Date of Action  | Time Limit to File Document |
|---|--------------------------|--|---|-----------------------------|
| Deleting <u>all</u> family members (no reason for request needed) (*)   | 25                       | Date STD. 692 signed   | Standard  | No time limit               |
| Employee and/or dependent enrolled but not eligible or dual and/or split coverage exists  | 42                       | Date of original<br>enrollment or dual and/or<br>split coverage<br>Began | Date of original<br>enrollment or dual and/or<br>split coverage | No time limit               |
| Newly hired eligible employees<br>terminated due to layoff then re-<br>hired within 36 months under<br>stated policy conditions | 01a                      | Date of Rehire   | Standard  | 60 Days from rehire date    |

<sup>(\*)</sup> Employee may not re-enroll dependents until open enrollment period.

# DENTAL PROGRAM CHANGE OF DENTAL PLAN

| Permitting Event  | Permitting<br>Event Code | Permitting Event Date               | Effective Date of Action | Time Limit to File Document                     |
|---|--------------------------|-------------------------------------|--------------------------|---|
| Upon return to active pay status after being off during the entire open enrollment period                             | 31                       | Date of return to active pay status | Standard                 | 60 days from event                              |
| Moving <u>out of</u> group practice plan or service cancellation  | 34                       | Date of move or service change      | Standard                 | 31 days prior to move; no time limit after move |
| Moving into group practice plan service area or service added   | 35                       | Date of move or service change      | Standard                 | 31 days prior to event; 60 days after event     |
| Change in bargaining unit or employee designation <b>and</b> new dental plan options available or change required (*) | 40                       | Effective date of change            | Standard                 | No time limit                                   |

<sup>(\*)</sup> No time limit but document should be processed promptly. The Personnel should ensure that employee's who transfer in from another department or have a CBID change are enrolled in the correct dental plan based on their CBID, e.g., State Plan or Union Plan.

#### **DENTAL PROGRAM**

#### **OPEN ENROLLMENT PERIOD**

| Permitting Event  | Permitting<br>Event Code | Permitting Event Date                       | Effective Date of Action   | Time Limit to File Document  |
|---|--------------------------|---|--|--|
| New Enrollment  | 03                       | First day of open enrollment period for all | January 1st of the following year for all  | Refer to specific open enrollment instructions which are provided to |
| Addition/deletion of a dependent(s) (*)                         | 15                       | open enrollment transactions.               | open enrollment<br>transactions  | departments prior to the open enrollment period.                     |
| Change of plan  | 28                       | transastioner                               | and the second s | ornominant pariou.   |
| Change of plan <u>and</u> addition/deletion of dependent(s) (*) | 29                       |   |  |  |
|   |                          |   |  |  |

<sup>(\*)</sup> Can be processed on one enrollment form.

<sup>(\*\*)</sup> To be used when an employee completes the three year dental commitment under the FlexElect Program.

#### **DENTAL PROGRAM**

#### **CANCELLATION OF ALL COVERAGE**

| Permitting Event  | Permitting<br>Event Code | Permitting Event Date            | Effective Date of Action                                      | Time Limit to File Document                       |
|---|--------------------------|----------------------------------|---|---|
| Voluntary  Employment status changes to less than one-half time | 36a<br>38                | Date signed  Date status changes | Standard (*)  1st day of the second month following the event | No time limit  No time limit (eligible for COBRA) |

<sup>(\*)</sup> Employees who voluntarily cancel dental coverage may not re-enroll in a dental plan until a dental open enrollment period, unless there is a family status change. If employee is enrolling in FlexElect Dental Cash Option, than the cancellation effective date <u>must be</u> the same as the FlexElect effective date.